



STATE OF WASHINGTON  
DEPARTMENT OF FINANCIAL INSTITUTIONS  
DIVISION OF CONSUMER SERVICES

P.O. Box 41200 • Olympia, Washington 98504-1200  
Telephone (360) 902-8703 • TDD (360) 664-8126 • FAX (360) 664-2258 • <http://www.dfi.wa.gov/cs>

**MORTGAGE LOAN ORIGINATOR (MLO)  
2012 DECLARATION OF ACTIVITY**

I, \_\_\_\_\_, declare:  
Print Name

1. I am above the age of eighteen and, based on my personal knowledge, am competent to testify to the facts as stated in this declaration.

2. In 2011, I held a Washington Mortgage Loan Originator license number MLO-\_\_\_\_\_.  
(NMLS number)

3. I certify that since January 1, 2012, I

☐ have performed any activity that would require licensure under Chapter 19.146 RCW, the  
☐ have not Mortgage Broker Practices Act or Chapter 31.04 RCW, the Consumer Loan Act.  
(Check One)

4. I further certify that since January 1, 2012, I

☐ have received any compensation that would require licensure under Chapter 19.146  
☐ have not RCW or Chapter 31.04 RCW.  
(Check One)

5. I will refrain from conducting any activity that would require licensure under Chapter 19.146 RCW or Chapter 31.04 RCW until the Department issues me a valid Mortgage Loan Originator license for 2012.

I declare under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

DATED this \_\_\_\_ day of \_\_\_\_\_, 2012, in \_\_\_\_\_,  
Day Month City State

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Contact Phone Number

**Please ONLY fax or email this declaration to Washington DFI.**  
**Fax: 360-664-2258 Email: DCS@dfi.wa.gov**